15/5/2010

INS. CASE OWNER: CC 3 /AIG1801 0006 / A2463 | LKK: | IDAC:

ASSIGNMENT

Surveyor: Adrian | DOI: 12/6/18 | Date / Time: 5/6/18 | Registered in Merimen: 5/6/18

Pre-assign / CCU / FTE

Insured Vehicle No. : SLQ 4459B | Claim No. : 41667W415754

Name of Insured : HO SANG WANG. | Policy No. : 70051078.

Insured Tel No. : | HP: | Make / Model : MAZDA

Excess Sec II :S$ | D.O.A : 4/6/18 | Place of Accident : TUAS AVE 3 ST 61 (2 MONTHS AVE 8 JUNC

Is driver the owner? (YES / (NO)) | Nature of Accident :

If **NO**, Driver Name / Age : YAP LEE FUNG. | OI GIA REPORT: (YES) / NO ; TP GIA REPORT: (YES) / NO

Driver Tel No. : | (V/L: (YES) / NO) | Insured Liability : % | **Final ? Yes / No**

SLW 7771L → → →

INSRS: WSP: Tel : Liability : Premium RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLW 7771L-✗ SLQ 4459B-✗
7/6/18 TTN	
6/6/18	spoke to OID, she confirmed the accident details. Informed to claim and she agree to settle. She mention there is no damage to TP vehicle. She may dispute on COR.
	TRANSFER: THIN2 TO JOY
13-12-18	PENDING FINALISATION

STAGE	DATE / PIC
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	> THIN
After call ltr to OI:	2017

Documentation Check List:	Handler	Typist
Notification ltr (if non-pickup)	✗	
After call ltr to OI:	/	
Authorisation To Act:	/	
Release Voucher:	/	
Final Repair Bill:	/	
Car Rental Invoice:		
Towing Invoice	✗	
LTA / GIA :	/	
Medical Bill:	✗	
PIR:	✗	
Mandate/Reject Instruction:	✗	
LOD	✗	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with: Confirm by:

Repair Cost: S$ (days) Reduction: % Email ☐ Call ☐

FINAL SETTLEMENT Date/Time: 20.2.19 Confirm with NORA Email ☐ Call ☐

Final Liability:	% 100 . (Agreed / Assessed) BOLA S/N No. : 27	If NO or B 28, Ass. Lia :
Repair Cost: GST	S$ 3,346.53	
Loss of Rental (LOR):	S$ – (days)	
Loss of Use (LOU):	S$ 180.xx (60 x 3 days)	
Loss of Income (LOI):	S$ – ($ x days)	
LOR only ☐ LOU only ☐	LOR + LOU ☐ LOR + LO ☐ [Tick only one]	
GIA/LTA Search	S$ 2.xx	
Medical:	S$ –	1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ – (e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ –	3) Survey fee:
Total:	S$ 3,528.53 **Global Sum S$:**	

COPY SENT

FINAL PAYMENT Date/Time: Confirm with: Email ☐ Call ☐

Payee 1:	S$ 3,348.53	Name 1:	PREMIUM AUTOMOBILES PTE LTD
Payee 2: (Strike if N.A.)	S$ 180.xx	Name 2:	LIM BENG WEE
Payee 3: (Strike if N.A.)	S$	Name 3:	

3348.53